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Placing Great Labs in Great Homes around the Great Lakes

## **ABOUT YOUR LAB**

Lab's Name:			
Adoption Date:			
Birth Date:			
Age:			
Background: (shelter, stray, surrender)			
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Date Spayed/Neutered:			
Type of Heartworm preventative given:			
Date Heartworm preventative given:			
Next Heartworm preventative due:			
Next Heartworm test due:			
Vaccinations given on: Given by:			
Type of Flea/Tick preventative given:			
Date Flea/Tick preventative given:			
Next Flea/Tick preventative due:			
Recently completed treatment	nt for:		
		1	
Currently feeding: (type and/or brand)			
Feeding Quantity:			
Feeding Times: (2x/day, recommended)			
Special notes regarding diet:			

Crate Trained:	YES / NO		
Need to be crated:	YES / NO		
Housebroken:	YES / MOSTLY / NO		
Used to Sleeping:			
Special treats or favorite toys:			
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Any known fears (storms, loud noises, etc.):			
Obedience commands known:			
Comments/Suggestions regarding your new Lab:			